PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	correspondence including ed below or directed other				or n orres	pondence address;	and/or	(b) indicating a sepa	rate "FEE Al	DDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
22150	7590 10/17	/2007				Cor	tificate	of Mailing or Transı	nission		
F. CHAU & ASSOCIATES, LLC 130 WOODBURY ROAD WOODBURY, NY 11797						reby certify that the es Postal Service we reced to the Mail	is Fee(s tith suf	s) Transmittal is being ficient postage for firs ISSUE FEE address 1) 273-2885, on the da	deposited with class mail in above, or be	n an envelope	
WOODBOXEL										Depositor's name)	
					\vdash					(Signature)	
					\vdash					(Date)	
L DEV LO LEVOVANO	EU DIG DATE	FILING DATE		FIRST NAMED INVEN	TOR	OR ATTORNEY DOCKET NO.			CONFIRMATION NO.		
APPLICATION NO.								240 (IB14008-US)		8723	
10/775,763 TITLE OF INVENTION	02/10/2004 I: TURBO DECODER A	ND TU	JRBO INTERLEA	Myeong-Cheol Sh	1111		8830-	240 (IB14000-03)	072		
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY ISSU		PUBLICATION FEE DU		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DAT	E DUE	
nonprovisional	NO	<u> </u>	\$1440	\$300		\$0		\$1740 01/17/2		7/2008	
EXAMINER			ART UNIT	CLASS-SUBCLASS							
BAKER, STEPHEN M			2112	714-702000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSI	E PRINTED ON The low, no assignee of this form is NO	THE PATENT (print or type) e data will appear on the patent. If an assignee is identified below, the document has been filed for OT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
SAMSUNG ELECT	SUWON-SI, REPUBLIC OF KOREA										
Please check the appropr	iate assignee category or	catego	ries (will not be pr	inted on the patent):	0	Individual 🖾 Co	rporati	on or other private gro	up entity 🔲	Government	
4a. The following fee(s) are submitted:				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0679 (enclose an extra copy of this form).							
5. Change in Entity Sta	tus (from status indicate	d above	·)								
a. Applicant claim	s SMALL ENTITY statt	is. See	37 CFR 1.27.					FITY status. See 37 CF			
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) v tes Pate	vill not be accepted ent and Trademark	d from anyone other the Office.	han ti	he applicant; a regi	stered a	attorney or agent; or th	e assignee or	other party in	
Authorized Signature				Date 1/10/07							
Typed or printed name FRANK CHAU				Registration No. 34, 136							
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu 'irginia 22313-1450. DO	U.S.C. USPT rden, sh NOT	O. Time will vary nould be sent to the SEND FEES OR (depending upon the Chief Information COMPLETED FORM	indiv Office IS TO	idual case. Any co rr, U.S. Patent and O THIS ADDRESS	mment Traden S. SENI	s on the amount of tin hark Office, U.S. Depa O TO: Commissioner i	ne you require the requirement of Coror Patents, P.	O to process) reparing, and to complete mmerce, P.O. O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to resp